

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10054895

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1					53						
4		1					54						
5		1					55						
6		1					56						
7		1					57						
8		1					58						
9		1					59						
10		1					60						
11		1					61						
12		1					62						
13		1					63						
14		1					64						
15		1					65						
16		1					66						
17		16					67						
18		16					68						
19		16					69						
20		16					70						
21		1					71						
22		1					72						
23		4					73						
24		4					74						
25		4					75						
26		8					76						
27		8					77						
28		8					78						
29		8					79						
30		8					80						
31		1					81						
32		1					82						
33		1					83						
34		1					84						
35		1					85						
36		1					86						
37		1					87						
38		1					88						
39		1					89						
40		1					90						
41		1					91						
42		1					92						
43		1					93						
44		1					94						
45		1					95						
46		1					96						
47		1					97						
48							98						
49							99						
50							100						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	128	179					TOTAL DEP.						
TOTAL CLAIMS	133						TOTAL CLAIMS						

CLAIMS ONLY							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1			1									
2		1											
3		1											
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18		16											
19		16											
20		1											
21		1											
22		1											
23		1	4		5								
24		1	4		4								
25		1			1								
26		8	8		8								
27		8	8		8								
28		8	8		8								
29		8	8		8								
30		1			1								
31		1			1								
32		1			1								
33		1			1								
34		1			1								
35		1			1								
36		1			1								
37		1			1								
38		1			1								
39		2			1								
40		1			1								
41		1			1								
42		1			1								
43		1			1								
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95													
96													
97													
98													
99													
100													
TOTAL IND.	243				3								
TOTAL DEP.	83				130								
TOTAL CLAIMS	91				133								

776 1200
C400

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS